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ABSTRACT

This pamphlet is intended to inform educators and provide guidelines for dealing with drug use and abuse in schools. Problems related to and arising from our living in a drug-taking society are discussed and clarified. Other sections are concerned with: (1) the rationale; (2) recommended procedures for school-centered drug problems; (3) a legal appendix, which provides information on students' rights, federal drug laws and Minnesota drug laws; and (4) an appendix on symptoms and identification of potential drug users. Also included is a list of members of the Minnesota Ad Hoc Committee on school-centered problems related to drug use and abuse. Advice is given for adults who must deal with drug-connected youth and the procedures to follow in specific situations are outlined carefully. (TA)

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STATE OF MINNESOTA
DEPARTMENT OF EDUCATION
DIVISION OF INSTRUCTION
ELEMENTARY & SECONDARY

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Guidelines on School Centered Problems Related to Drug Use and Abuse

STATE OF MINNESOTA
DEPARTMENT OF EDUCATION
ST. PAUL, MINNESOTA 55101

St. Paul, 1971

RATIONALE OR INTRODUCTION

Drug use and abuse are now issues of major concern. Cooperative and coordinated approaches to the solution of the problem are needed involving the school, home, and community agencies. School administrators, teachers, pupil personnel workers, and other school staff have expressed concern and confusion relative to the scope of the problem, procedures to be followed when providing services to pupils with a problem, and educational approaches. However, before recommending guidelines for drug use and abuse problems, it is imperative for all concerned persons in the school-community to recognize some basic factors.

We live in a drug taking society, and a large segment of our population look to drugs to alleviate a host of physiological, psychological, and social discomforts. This can be the use or abuse of tobacco, alcohol, and prescribed and non-prescribed drugs. The average medicine cabinet in the U.S. contains 23 compounds which alter mental processes.

The mobility of the population makes it difficult to limit the drug problem to large population centers. Technology has contributed to the mobility of population and has brought people together. At the same time, however, it has contributed to the increased alienation of people.

The wholesale manufacture of drugs and careless distribution of them has also compounded the problem. Many of these drugs eventually are possessed by the illegal market and are sold at a great profit.

The school should become actively involved in coping with the problem, helping students to develop their potentialities and to maintain their freedom rather than have drugs become their master. A comprehensive curriculum and inservice education program are vital. The following points should be the concern of all adults who are involved with youth:

1. Avoid Panic: Educators are in a particularly good position to encourage parents, students, and the community to remain levelheaded about drug abuse.
2. Keeping Lines Of Communication Open: Encouraging an atmosphere in which the student feels free to confide in parents and teachers and to discuss his concerns is an important first step. It is important to avoid being moralistic and judgmental in talking about drugs and drug users.
3. Being Well-Informed About Drugs: Much information is available about the drug problem. Some of the information is accurate and useful, but some is overdramatized and inaccurate. (Inservice education should be provided.)
4. Avoiding Scare Techniques: Use of sensational accounts or scare techniques in trying to discourage drug use is usually ineffective. To be effective, prevention must be based upon honest, accurate information and thoughtful discussion of the issues and consequences.
5. Avoiding Drug Stereotypes: The person who misuses drugs may

vary from the one-time user experimenting out of curiosity to the chronic, heavy user who is psychologically dependent on a drug.

6. Developing Preventive Educational Programs, and Cooperating With Community Agencies In The Rehabilitation of Drug Users: Communication and cooperation among the various agencies such as the mental health center, law enforcement, medicine, and justice are essential.

RECOMMENDED PROCEDURES FOR SCHOOL-CENTERED DRUG PROBLEMS

The proper handling of drug problems is of vital concern to educators. There is no easy answer to these problems, due to the inherent complexity of drug use and abuse; a very fundamental difficulty is being certain that drug use or abuse even exists. However, the teacher is in a strategic position to observe and evaluate deviant behavior, especially a marked change from previously known characteristics. Assessment of educational disability and investigation of reasons for poor academic performance are the inherent responsibilities of the teacher. The teacher, in addition to making the educative process as interesting, constructive, and alive as possible, can also have a great influence on the decision to take or continue to take drugs. He is often the confidant when parents are lacking or have failed to accept their role.

Procedures for school-centered drug problems should be based upon the assumption that the school's chief role is one of helping or assisting students, rather than providing a law enforcement function. However, school authorities should be in contact with local law enforcement officials and rehabilitation agencies to develop appropriate procedures to be followed in handling and referring students with a drug problem. Each school district should have a policy approved by the local board of education relative to how the school should function in a variety of situations involving drug use and abuse, law enforcement, and rehabilitation.

Everyone concerned with education should be familiar with the following broad concepts of action to be taken in drug use and abuse situations. These recommended procedures are of a general nature and are designed to assist school districts in developing their own policies to accommodate the many specific situations which can exist in this complex area.

(Note: Each problem should be handled on an individual basis.)

A. A Pupil Is Suspected By A Staff Member As Being A Drug User. (This includes a pupil reported by a friend as having a drug problem.)

1. The staff member should be familiar with symptoms to help identify a drug user or abuser. (Refer to appendix for suggested signs or symptoms. The school district should provide inservice education for its staff.)
2. The staff member should specify to the pupil that he has concern for the pupil's health and performance. Educators must be concerned with the roles they play after a suspicion has been confirmed. This can involve on-going counseling with parents, helping with a pupil's rehabilitation, continuing rapport with law enforcement agencies, and determining if more than one student is affected.
3. The staff member should refer the pupil to the school nurse, counselor, or building principal. While the law does not require the principal to contact the parents or legal guardian, it is generally

prudent to contact the parents at an appropriate time to arrange an interview with them and the pupil to interpret the need for medical and/or psychiatric treatment.

The parent's options are to seek medical assistance, psychological assistance from a mental health center, or legal assistance from a juvenile court judge. If parents do not accept one of the options, the school should take appropriate action based upon the facts and upon advice of the school attorney and medical advisor.

4. The pupil should be kept in school as long as possible unless the pupil's welfare and/or student body would be affected.

B. A Pupil Reports To A Staff Member That He Has A Drug Problem

1. The staff member should counsel the student first and urge the student to confer with other school staff (counselor, nurse, social worker) and/or parents.

   At some stage, a gentle, subtle inquiry should be made as to the source of the pupil's drugs. This should be done emphasizing that the staff member is not a law enforcement person, but is concerned with helping the pupil. (Note: Teachers do not have a statutory privilege of confidentiality as some other professionals have.) The reason for this inquiry would be to get some insight into other users in the school and make early observations on their problem. Because of the "contagious" nature of drug abuse, every effort should be made to determine the sources of supply and the names of other students who may be abusing drugs. (Experience in this area has shown that drug abusers attempt to pass their habit to friends to raise money. The frequently made claim that adult drug pushers being youngsters on drugs is usually contrary to fact.)

   As pupils with drug habits may drop out of school, continuance in an educational program may depend on the pupil receiving prompt and proper care. Constant contact should be maintained by school personnel and service agencies with parents to ascertain that the pupil is abstaining from drugs, continuing treatment, and receiving the psychological support needed. A student who has been abusing drugs will probably need special educational guidance and extra emotional support. Extraordinary efforts may be required to help him overcome his problem and stay enrolled. However, if these measures fail, the welfare of the student body must be considered because some students may be influenced by the presence of the drug abuser. In such a situation, the drug abuser may have to be referred to a special institution or agency specifically equipped to handle such problems.

2. The teacher should inform the building principal and/or superintendent of the problem.

3. While the law does not necessarily require the principal to contact the parents or legal guardian, it is generally prudent to con-

tact the parents at an appropriate time to arrange an interview with them and the pupil to interpret the need for medical and/or psychiatric treatment. (In some instances, the pupil may not want his parents contacted immediately.)

4. If the family is unable or unwilling to provide for private help, parental permission should be obtained by the school district to refer the pupil to the appropriate agency. Following this referral, the parents or legal guardian should be informed of the agency findings, and recommendations should be made to the parents.
5. If the parents are unwilling to accept an appointment and/or refuse permission for an appropriate agency interview for the pupil, the school should take appropriate action based upon the facts, and upon the advice of the school attorney and medical advisor as outlined by school district policy.

C. A Pupil Has Possession Of A Non-Medically Prescribed Drug.

1. The staff member should report to the building principal and/or superintendent.
2. Depending upon the situation, the principal may contact only the parent if the situation appears not serious. However, in other situations, the principal may need to contact the local law enforcement official or police liaison officer for cooperation in arranging an interview with the parents or legal guardian, pupil, and law enforcement official. The seriousness of the situation should dictate the extent to which other parties are involved.

D. A Pupil Is In Need Of Immediate Medical Assistance.

1. Local emergency policies should be followed. If no local policies have been developed, they should be developed based upon the **School Health Manual** (a joint publication of the Minnesota Health Department and Minnesota Department of Education, 1965).
2. In case of unconsciousness, which may be drug induced, rapid aid is vitally important. Schools should have a standing procedure for emergencies. A medical professional should be called immediately or an ambulance summoned to take the victim to a hospital. If breathing fails, some form of artificial respiration should be administered until medical help arrives. Parents should be advised of the situation as quickly as possible.
3. For other emergencies, the building principal or school nurse should be contacted by intercom or phone. The second choice would be to send a note. The following suggestions should be considered:
   a. A phone call should be made quietly.
   b. A note sent with another pupil should be stapled or sealed.
   c. Do not leave the classroom unattended unless necessary.
   d. Do not send the ill pupil anywhere, because the teacher will have no control over his ultimate destination.

4. The transfer of a pupil from the classroom to the nurse's quarters should be handled as tactfully as possible. It should be remembered that, generally, the pupil who has become involved with drugs needs treatment rather than censure. The pupil need not be informed of the action until help has arrived. At that time he can be quietly called or assisted to the door and turned over to the person responding to the request.
5. After the pupil has been taken to the nurse or principal, the parents should be contacted. If the parents (or legal guardian) are not available, the school should assist the pupil as much as possible until the parents can be reached. It may be necessary to take the pupil to the physician or hospital without the parents' consent in serious situations.
6. When the parents arrive, they should be informed that their child is ill and should be referred to an appropriate source such as a family physician or mental health center.

E. A Student Returns To School Following Absence Because Of A Drug Related Problem.

1. The decision to permit a student to return to school should be made in consultation with school authorities, medical and/or psychiatric staff, law enforcement officials, parents, and the student. The student should be under careful supervision of the parents and school staff.
2. A close liaison should be established between the school and treatment staff in order that the school may be of the greatest help to the student. (Treatment staff is considered to be anyone working with the student at that point in time.)
3. The student should be encouraged and allowed to participate in school activities within state and local rules and policies.
4. Care should be exercised to prevent the intentional or unintentional segregation of the student or the focusing of unusual attention on him.

LEGAL APPENDIX

The laws relating to drug abuse are quite complex and are derived from many different sources. There are, for example, statutes and regulations on both the federal and state level, so that certain acts constitute violations of both federal and state laws. There is also some repetition and overlapping just within the Minnesota statutes. It would be too cumbersome to summarize or reproduce all of these legal provisions for the purposes of these guidelines. Reference will be made to those which are deemed most appropriate and most likely to be confronted by school authorities.

It is expected that changes in the state drug laws will be proposed to the 1971 Minnesota Legislature. Close attention should, therefore, be given to the legislative proceedings and any laws which may be passed on this subject.

I. Students' Rights

In the relationships or confrontations which develop between students and school officials or police because of drug-related problems, there are various legal issues which may arise concerning the rights of the student and the authority of the school officials or police. Some of these are:

1. Questioning or interrogation
2. Search (of lockers, for example) and seizure of evidence or other material
3. Confidentiality of communications or records
4. The reasonableness of disciplinary action taken by the school authorities, in light of the conduct leading to such action
5. The proper procedure to follow in taking such action

In most instances answers to questions involving these issues cannot be found in a statute but must be derived from court decisions and other interpretations of statutory and constitutional provisions. There has been in recent years an increasing number of court decisions throughout the country in both state and federal courts, as they relate to the schools. From these it is apparent that the decision often depends on the specific facts involved in each case. It is, therefore, advisable for each school district to consult its attorney about these kinds of problems and how they should be handled.

While only a very small number of decisions on these issues have been made in Minnesota, they are helpful, and all school authorities should be cognizant of them. They are related primarily to questions involving the propriety of suspending or expelling students, and the procedure to be followed.

A. Opinion of the Attorney General, No. 161-b-11, April 24, 1967.

This opinion provides some guidance on the suspension or expulsion of a student who violates a law or engages in conduct which the

school officials deem to be improper. In the opinion request a question was raised concerning a proposed school board rule prohibiting smoking in and around the school and throughout the small community. Special mention was made of Minnesota Statute 609.685, which makes unlawful the use of tobacco by any person under 18 years of age.

The Attorney General held that action by the school board must not be arbitrary and that violation of the no-smoking law, or of a corresponding school board rule, was not in itself sufficient reason to suspend or expel a student. It was stated in the opinion:

> "The mere fact that a student under the age of 18 violates the provisions of Minnesota Statute 609.685 (1965), or a rule promulgated by the school board prohibiting smoking in the community is not sufficient cause, standing alone, to warrant dismissal. Only when the violation of the statute or rule undermines good order and discipline in school, may the school authorities impose the sanction of dismissal or suspension."

In quoting from an earlier opinion, it was also said:

> "If from a consideration of these facts and circumstances surrounding the matter, the board concludes that good order and discipline of the school will not be disturbed by the presence of the pupil in school, she should not be expelled."

B. **Gibbons v. Ind. School Dist. No. 181,** 9th Judicial District, Crow Wing County, File No. 35482 (April 7, 1969).

In this case a student challenged the action of school authorities in expelling him for truancy. He had been suspended twice for unexcused absences, and pursuant to a school district rule he was expelled for the remainder of the year. In holding the action of the school district to be invalid, the court included among its findings and conclusions the following:

> "That two truancies as a ground for expulsion, standing alone, without regard to the particular facts involved, is unreasonable and arbitrary and contrary to law.
>
> That the truancies involved herein did not threaten good order, student discipline or the welfare of the school, and was not a sufficient cause for expulsion . . .
>
> * * *
>
> That the expulsion of plaintiff minor under the facts herein found are unreasonable, arbitrary and without sufficient cause, and therefore, contrary to law.
>
> That the two alleged truancies did not disrupt the education of others, nor in any way affected the order, discipline, health and welfare of other students.
>
> That the rule in its present form is an invalid exercise of the school board's rule-making power.

That the punishment to Jerome by the enforcement of the rule is too drastic and harsh for the errors committed by the plaintiff minor and works to effectively deprive him of an education and a continuance of his academic education at a time when it is most needed.

That plaintiff was entitled to a hearing on his expulsion. Such a hearing should be held in accordance with the rules of fair play and with the principle that due process requires notice and some opportunity to be heard.

That the rule in its present form is unconstitutional, and contrary to the First and Fourteenth Amendments to the Constitution of the United States."

The Court also made the following observation in its memorandum: "It might be well in the future for a school board, when it attempts to expel a student, to have a hearing, make a record, make findings, and then order expulsion if it deems it necessary to insure order, discipline, health, welfare and safety of the pupils or school property."

C. **Westley v. Rossi,** 305 F. Supp. 706 (D. Minn. 1969).

This case in federal district court concerned a male student who was prevented from attending a public school because of the length of his hair. The court held that there was insufficient cause for the expulsion of the student, and stated in its opinion:

"Regulation of conduct by school authorities must bear a reasonable basis to the ordinary conduct of the school curriculum or to carrying out the responsibility of the school."

D. Minnesota Statutes

There are a few provisions in Minnesota Statutes 1969 which bear on the suspension or expulsion of students from the public schools.

"**120.06. ADMISSION TO PUBLIC SCHOOL.** Subdivision 1 **Age limitations; pupils** . . . Admission to a public school is free to any person who resides within the district which operates the school, who is under 21 years of age, and who satisfies the minimum age requirements imposed by this section . . ."

"**120.10. COMPULSORY ATTENDANCE.** Subdivision 1. **Ages and term.** Every child between seven and 16 years of age shall attend a public school, or a private school, for a period of not less than nine months during any school year . . ."

"**123.35. GENERAL POWERS OF INDEPENDENT SCHOOL DISTRICTS.** Subdivision 2. It shall be the duty and the function of the district to furnish school facilities to every child of school age residing in any part of the district . . ."

"**127.071. EXCLUSION, EXPULSION OR EXCUSE OF STUDENTS.** No school board shall without sufficient cause, exclude, expel or excuse from school privileges any person entitled to ad-

mission as a student to the schools of such district. When a person has been excluded, expelled or excused by a school board, such action of the board shall be reported to the commissioner of education within 30 days."

"**127.17. SECRET FRATERNITIES AND SOCIETIES.** Subdivision 3. **Penalties.** The boards shall have full power and authority, pursuant to the adoption of such rules and regulations made and adopted by them, to suspend or dismiss any pupil of such schools therefrom, or to prevent them, or any of them, from graduating or participating in school honors when, after investigation, in the judgment of such boards or a majority of their membership, such pupil is guilty of violating any of the provisions of this section or is guilty of violating any rule or regulation adopted by such boards for the purpose of governing such schools—or enforcing this section."

II. Federal Drug Laws

Congress has just recently enacted the Comprehensive Drug Abuse Prevention and Control Act of 1970, Public Law 91-513. This is a lengthy and comprehensive law, and deals with various aspects of rehabilitation, control and enforcement, education programs, and importation and exportation.

The statute defines many different kinds of "controlled substances" and places them into five different classes or schedules, depending on their potential for abuse, acceptance in medical practice and likelihood of leading to psychological or physical dependence. Penalties for manufacture or distribution of such substances vary with the schedule in which they are placed.

Simple possession of a controlled substance, when unlawful, is punishable by a prison term or up to one year or a fine of not more than $5,000, or both. The penalty can be increased for multiple offenders. Provision is made for the granting of probation and dismissal of proceedings if the conditions of probation are not violated.

The penalties of unlawful distribution of controlled substances are made more severe when the distribution is by a person at least 18 years of age to a person under 21 years of age.

III. Minnesota Drug Laws

A. Minnesota Statutes 1969, Chapter 618: Uniform Narcotic Drug Act. This chapter contains many of the basic provisions concerning the sale and possession of narcotic drugs. The most pertinent provisions are quoted below.

"**618.01. DEFINITIONS.** Subdivision 11. **Sale.** 'Sale' includes barter, exchange or gift, or offer therefor, and each such transaction made by any person, whether as principal, proprietor, agent, servant, or employee.

Subdivision 12. **Coca Leaves.** 'Coca Leaves' includes cocaine and any compound, manufacture, salt, derivative, mixture, or preparation of coca leaves, except derivatives of coca leaves which do not contain cocaine, ecgonine, or substances from which cocaine or ecgonine may be synthesized or made.

Subdivision 13. **Opium.** 'Opium' includes morphine, codeine, and heroin, and any compound, manufacture, salt, derivative, mixture, or preparation of opium, but does not include apomorphine or any of its salts.

Subdivision 14. **Narcotic drugs.** 'Narcotic drugs' means coca leaves, opium, cannabis, isonipecaine, amidone, isoamidone, ketobemidone, and every other substance neither chemically nor physically distinguishable from them; any other drugs to which the federal narcotic laws may now apply; and any other drug which is hereafter included under the federal narcotic law and found by the state board of health after reasonable notice and opportunity for hearing, to have an addiction-forming or addiction-sustaining liability similar to morphine or cocaine, from the effective date of determination of such finding by said state board of health.

Subdivision 15. **Isonipecaine.** 'Isonipecaine' means the substance identified chemically as 1-methyl-4-phenyl-piperidrine-4-carboxylic acid ethyl ester, or any salt thereof by whatever trade name identified.

Subdivision 20. **Amidone.** 'Amidone' shall mean any substance identified chemically as (4, 4-Diphenyl-6-Dimethylamino-Heptanone-3), or any salt thereof, by whatever trade name or number identified.

Subdivision 21. **Isoamidone.** 'Isoamidone' shall mean any substance identified chemically as (4, 4-Diphenyl-5-Methyl-6-Dimethylaminohexanone-3), or any salt thereof, by whatever trade name or other name or number identified.

Subdivision 22. **Keto-bemidone.** 'Keto-bemidone' shall mean any substance identified chemically as [4-(3-Hydroxy-phenyl)-1-Methyl-4-piperidyl ethyl ketone hydrochloride] or any salt thereof, by whatever trade name or other name or number identified.

Subdivision 23. **Cannabis.** 'Cannabis' includes all parts of the plant Cannabis Sativa L., whether growing or not; the seeds thereof; the resin extracted from any part of such plant; and every compound, manufacture, salt, derivative, mixture, or preparation of such plant, its seeds, or resin; but shall not include the mature stalks of such plant, fiber produced from such stalks, oil or cake made from the seeds of such plant, any other compound, manufacture, salt, derivative, mixture or preparation of such mature stalks (except the resin extracted therefrom), fiber, oil, or cake, or the sterilized seed of such plant which is incapable of germination."

"**618.02. UNLAWFUL ACTS.** Except as authorized by this

chapter it shall be unlawful for any person to sell, prescribe, administer, dispense or furnish to a minor, or manufacture, possess, have under his control, sell, prescribe, administer, dispense, or compound any narcotic drug."

"**618.03. LICENSE REQUIRED TO MANUFACTURE OR WHOLESALE.** No person shall manufacture, compound, mix, cultivate, grow, or by any other process produce or prepare narcotic drugs, and no person as a wholesaler shall supply the same without having first obtained a license so to do from the department of health; provided, that no such license shall be required of the University of Minnesota, nor any college approved by the University of Minnesota, in the manufacturing, compounding, mixing, cultivating, growing, producing, and preparing of narcotic drugs for educational and scientific purposes only."

"**618.21. VIOLATIONS, PENALTIES.** Subdivision 1. Except as provided in subdivision 2, any person violating any provisions of this chapter shall be punished by a fine of not exceeding $10,000 and by imprisonment in a state penal institution for not less than five nor more than 20 years.

Subd. 2. Any person convicted of selling, prescribing, administering, dispensing or furnishing any narcotic drug to a minor under the age of 18 years shall be punished by a fine of not exceeding $20,000 and by imprisonment in a state penal institution for not less than ten or more than 40 years."

"**618.22. PROSECUTION UNDER FEDERAL NARCOTIC LAWS.** No person shall be prosecuted for a violation of any provisions of this chapter if such person has been acquitted or convicted under the federal narcotic laws of the same act of omission which, it is alleged, constitutes a violation of this chapter."

B. Minnesota Statutes 1969, Chapter 152: Prohibited Drugs.

This chapter deals with authority of the State Board of Pharmacy to regulate the sale of depressant or stimulant drugs. Some of the provisions are quoted below.

"**152.01. DEFINITIONS.** Subd. 5. **Depressant or stimulant.** The term 'depressant or stimulant drug' means: any drug which contains any quantity of barbituric acid or any of the salts or derivatives of barbituric acid; any drug which contains any quantity of amphetamine or any of its optical isomers; any salt of amphetamine or any salt of an optical isomer of amphetamine; d-, dlmethamphetamine and their salts; chloral hydrate, ethchlorvynol, ethinamate, glutethimide, methyprylon, paraldehyde, di-methyltryptamine, d-lysergic acid diethylamide or any of its salts, mescaline and its salts, psilocybin, psilocibin, psilocyn, phenmetrazine and its salts, chloral betaine, chlorhexadol, petrichloral, sulfondiethylmethane, sulfonethylmethane, sulfonmethane, lysergic acid, and lysergic acid

amide; or any other drug which contains a quantity of a substance designated by regulations promulgated by the board of pharmacy as having shown a potential for abuse and injurious to health because of its depressant or stimulant effect on the central nervous system or its hallucinogenic effect."

"**152.041. RULES AND REGULATIONS.** The board of pharmacy is authorized to promulgate regulations to regulate and define drugs which contain a quantity of a substance having shown a potential for abuse and injurious to health because of its depressant or stimulant effect on the central nervous system or its hallucinogenic effect. All provisions of this chapter shall be applicable to the drugs so designated by such board."

"**152.10. SALES, PERSONS ELIGIBLE.** No person other than a licensed pharmacist, assistant pharmacist or pharmacist intern under the supervision of a pharmacist shall sell a stimulant or depressant drug and then only as provided in sections 152.09 to 152.12."

"**152.13. DUTIES OF STATE BOARD OF PHARMACY.** It shall be the duty of the state board to enforce the provisions of this chapter, and the power and authority of the board, as now defined by the laws of this state, are hereby extended so as to be commensurate with the duties hereby imposed."

"**152.15. VIOLATIONS: PENALTIES.** Subdivision 1. [Repealed, 1969 ch. 933, Statute 22]
Subd. 2. **Gross misdemeanor.** Any person, firm, or corporation that violates any provision of sections 152.09 to 152.12 shall be guilty of a gross misdemeanor; and, upon conviction thereof, punished by a fine of not to exceed $1,000, or by imprisonment in the county jail for not to exceed one year, or by both such fine and imprisonment."

"**152.17. SALE OF PEYOTE ILLEGAL.** No person shall use, sell, transport, or have in possession any peyote or preparation of peyote. The violation of this section shall be a misdemeanor."

Pursuant to Statute 152.041, the Board of Pharmacy has adopted regulations specifying certain drugs having a potential for abuse and injurious to health because of their depressant or stimulant or hallucinogenic effect.

C. Minnesota Statutes 1969, Statutes 145.38 through 145.40.

These provisions, commonly referred to as the "Glue Law", provide as follows:

"145.38. **SALE AND DISPLAY OF TOXIC GLUE.** Subdivision 1. No person shall sell to a person under 19 years of age any glue or cement containing toluene, benzene, zylene, or other aromatic hydrocarbon solvents, or any similar substance which the

State Board of Health has, by rule adopted pursuant to sections 15.0411 to 15.0417, declared to have potential for abuse and toxic effects on the central nervous system. This section does not apply if the glue or cement is contained in a packaged kit for the construction of a model automobile, airplane, or similar item.

Subd. 2. No person shall openly display for sale any item prohibited in subdivision 1."

"145.39. USE OF TOXIC GLUE. Subdivision 1. No person under 19 years of age shall use or possess any glue, cement or any other substance containing toluene, benzene, zylene, or other aromatic hydrocarbon solvents, or any similar substance which the state board of health has, by rule adopted pursuant to sections 15.0411 to 15.0471, declared to have potential for abuse and toxic effects on the central nervous system with the intent of inducing intoxication, excitement or stupefacation of the central nervous system, except under the direction and supervision of a medical doctor.

Subd. 2. No person shall intentionally aid another in violation of subdivision 1.

"145.40. PENALTY. Each violation of sections 145.38 to 145.40 is a misdemeanor."

At this time, the State Board of Health has not adopted any rules specifying "similar substances" under Statute 145.38.

D. Minnesota Statutes 1969, Chapter 609: Criminal Code of 1963.

The general criminal code contains several provisions relating to sentencing, which apply to violations of laws relating to drug abuse. Some of these which may be of particular interest are quoted below:

"609.02. DEFINITIONS. Subd. 2. **Felony.** 'Felony' means a crime for which a sentence of imprisonment for more than one year may be imposed.

Subd. 3. **Misdemeanor.** 'Misdemeanor' means a crime for which a sentence of not more than 90 days or a fine of not more than $300, or both, may be imposed.

Subd. 4. **Gross misdemeanor.** 'Gross misdemeanor' means any crime which is not a felony or misdemeanor."

"609.125. SENTENCE FOR MISDEMEANOR OR GROSS MISDEMEANOR. Upon conviction of a misdemeanor or gross misdemeanor the court, if sentence is imposed, may, to the extent authorized by law, sentence the defendant:

(1) To imprisonment for a definite term; or

(2) To payment of a fine, or to imprisonment for a specified term if the fine is not paid; or

(3) In the case of a conviction of a gross misdemeanor, to both imprisonment for a definite term and payment of a fine."

"609.13 CONVICTIONS OF FELONY: WHEN DEEMED MISDEMEANOR OR GROSS MISDEMEANOR. Notwithstanding a conviction is for a felony:

(1) The conviction is deemed to be for a misdemeanor or a gross misdemeanor if the sentence imposed is within the limits provided by law for a misdemeanor or gross misdemeanor as defined in section 609.02; or

(2) The conviction is deemed to be for a misdemeanor if the imposition of the sentence is stayed, the defendant is placed on probation, and he is thereafter discharged without sentence."

"609.135. STAY OF IMPOSITION OR EXECUTION OF SENTENCE. Subdivision 1. Except when a sentence of life imprisonment is required by law, any court, including a justice of the peace to the extent otherwise authorized by law, may stay imposition or execution of sentence and place the defendant on probation with or without supervision and on such terms as the court may prescribe. The court may order the supervision to be under the probation officer of the court, or, if there is none and the conviction is for a felony, by the commissioner of corrections, or in any case by some other suitable and consenting person.

Subd. 2. (1) In case the conviction is for a felony such stay shall be for not more than the maximum period for which the sentence of imprisonment might have been imposed.

(2) In case the conviction is for a misdemeanor the stay shall not be for more than one year.

(3) In case the conviction is for a gross misdemeanor the stay shall not be for more than two years.

(4) At the expiration of such stay, unless the stay has been revoked or the defendant discharged prior thereto, the defendant shall be discharged."

Chapter 609 also contains two general provisions relating to the aiding of offenders and obstructing legal process.

"609.495. AIDING AN OFFENDER TO AVOID ARREST. Subdivision 1. Whoever harbors, conceals, or aids another known by him have committed a felony under the laws of this or another state or of the United States with intent that such offender shall avoid or escape from arrest, trial, conviction, or punishment, may be sentenced to imprisonment for not more than three years or to payment of a fine of not more than $3,000, or both.
Subd. 2. This section does not apply if the actor at the time of harboring, concealing, or aiding is related to the offender as husband, wife, parent, or child."

"609.50. OBSTRUCTING LEGAL PROCESS OR ARREST. Whoever intentionally obstructs, hinders or prevents the lawful

execution of any legal process, civil or criminal, or apprehension of another on a charge or conviction of a criminal offense or interferes with a peace officer while the officer is engaged in the performance of his official duties may be sentenced as follows:

(1) If the act was accompanied by force or violence or the threat thereof, to imprisonment for not more than one year or to payment of a fine of not more than $1,000, or both; or

(2) In other cases to imprisonment for not more than 90 days or to payment of a fine of not more than $100."

APPENDIX A

SYMPTOMS OR IDENTIFICATION OF POTENTIAL DRUG USERS

The following are symptoms which may assist a teacher in suspecting possible drug use or abuse. Obviously, no one symptom should be considered an indication of such use or abuse. Also, it should be remembered that some of these symptoms could indicate normal adolescent variability or other health problems. In other words, symptoms are not proof. Conclusions should be based on fact, not assumptions.

GENERAL SYMPTOMS

- Abrupt changes in school or work attendance, quality of work, grades, discipline, work output
- Nodding, falling asleep in class
- Unusual flare-ups or outbreaks of temper
- Withdrawal from responsibility
- General changes in overall attitude
- Deterioration of physical appearance and grooming
- Furtive behavior regarding actions and possessions
- Wearing of sunglasses at inappropriate times (to hide dilated or constricted pupils)
- Continual wearing of long-sleeved garments (to hide injection marks)
- Association with known drug abusers
- Unusual borrowing of money from parents or friends
- Stealing small items from home, school or employer
- Attempts to appear inconspicuous in manner and appearance (to avoid attention and suspicion)
- May frequent odd places without cause, such as storage rooms, closets, basements (to take drugs)

The Glue Sniffer (or User of Other Vapor-Producing Solvents)

- Odor of substance on breath and clothes
- Excess nasal secretions, watering of eyes
- Poor muscular control
- Drowsiness or unconsciousness
- Increased preference for being with a group, rather than being alone
- Plastic or paper bags or rags, containing dry plastic cement or other solvent, found at home or in locker at school or at work

The Depressant Abuser (barbiturates, tranquilizers, "downs")

- Symptoms of alcohol intoxication with one important exception: no odor of alcohol on breath

- Staggering or stumbling
- Falling asleep inexplainably
- Drowsiness; may appear disoriented
- Lack of interest in school and family activities

The Stimulant Abuser (amphetamines, cocaine, "speed", "bennies", "ups")

- Pupils may be dilated (when large amounts have been taken)
- Mouth and nose dry; bad breath; user licks his lips frequently
- Goes long periods without eating or sleeping
- Excess activity; user is irritable, argumentative, nervous; has difficulty sitting still
- Chain smoking
- If injecting drug, user may have hidden eye droppers and needles among possessions
- Weight loss—rapid

The Narcotic Abuser (heroin, morphine)

- Lethargic, drowsy
- Inhaling heroin in powder form leaves traces of white powder around nostrils, causing redness and rawness
- Pupils are constricted and fail to respond to light
- Injecting heroin leaves scars, usually on the inner surface of the arms and elbows, although user may inject drugs in body where needle marks will not be seen as readily
- Users often leave syringes, bent spoons, bottle caps, eye droppers, cotton and needles in lockers at school or hidden at home

The Marijuana Abuser

- In the early stages of intoxication, may appear animated with rapid, loud talking and bursts of laughter
- In the later stages, may be sleepy or stuporous
- Pupils usually are dilated
- Odor (similar to burnt rope) on clothing or breath
- Remnants of marijuana, either loose or in partially smoked "joints" in clothing or possessions
- Usually user in a group, at least in early habit of smoking

Note: Unless under the influence of the drug at the time of observation, marijuana users are difficult to recognize; infrequent users may not show any of the general symptoms of drug abusers.

Marijuana is greener than tobacco. Cigarettes made of it (called "joints", "sticks" or reefers") are rolled in a double thickness of brown or off-white cigarette paper. Smaller than a regular cigarette, with the paper twisted or tucked in at both ends, the butts (called "roaches") are not discarded but saved for later smoking if not consumed at initial usage. Marijuana also

may be smoked in a pipe (very small bowl, long stem) or cooked in brownies and cookies.

- Time distortion—failure to have a time sense with respect to duration of involvement in a specific problem (Ex: Not completing a test, whereas done before.)

The LSD (or STP, DMT, THC) Abuser

- Users usually sit or recline quietly in a dream or trancelike state
- Users may become fearful and experience a degree of terror which makes them attempt to escape from the group
- Senses of sight, hearing, touch, body-image and time are distorted
- Mood and behavior are affected, the manner depending upon emotional and environmental condition of the user
- Users may have unpredictable flashback episodes without use of the drug

Note: It is unlikely that persons using LSD or other hallucinogens will do so in school, at work, or at home at a time when they might be observed. At least in the early stages of usage, these drugs generally are taken in a group situation under special conditions designed to enhance their effect.

LSD is odorless, tasteless and colorless. It may be injected, but usually is taken orally in impregnated sugar cubes, cookies, or crackers.

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